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Clinical Center JCAHO Work Group

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Competency --- Yes we have competent staff!

The quality of care provided to patients is lined directly to the competence of our clinical staff. Every hospital is responsible for assessing and documenting the competence of employees engaged in caring for patients. Competence is more than just possessing the knowledge or psychomotor skills necessary to perform a specific task. For nurses, pharmacists, technicians, therapists and all others that perform patient care responsibilities competence means that the caregiver consistently performs his or her patient responsibilities in a way that meets established standards of performance.

Who is included in competency assessment?

Competencies must be developed, assessed and documented for all employees providing care and/or services to patients in the Clinical Center. This process is not limited to direct patient care providers. It includes non-physician clinical staff employed by the Clinical Center and Institutes, contractors, volunteers and students. NIH Police who interact with patients also must demonstrate competence. Medical staff competency is assessed during the Clinical Center medical staff credentialing and privileging process



Hire → Initial Competency → Ongoing

What is this all about?

- Ensure quality of care by confirming that staff are competent to perform their job, and are able to integrate knowledge skills and abilities in to job expectations.
- Provides clear statement of expectations for roles and jobs within a department and organization
- Provide a framework for orientation for new employee, and the ongoing assessment of the employee

To ask questions of the Clinical Center Core group email: askCCJCAHO@cc.nih.gov

Which Standards address competencies?

- HR. 3 The leaders ensure that the competency of all staff, is assessed, maintained, demonstrated and continually improved
- HR 4.2 Ongoing in-service and other education and training maintain and improve staff competence
- HR 4.3 The hospital regularly collects aggregate data on competence patterns and trends to identify and respond to the staff's learning needs

How are competencies developed and who is responsible for developing them?

- “Organizational Competencies” (also referred to as “Clinical Center competencies”) reflect the strategic mission, vision and guiding principles of the organization and apply to all employees
- Departments define and describe job/position specific competencies. This should be done in collaboration among supervisors, employees, Department Heads, Administrative Officers and human resource staff.

What are examples of “core competencies”?

1. Safety and Emergency Preparedness
2. Diversity Appreciation and Communication
3. Quality (or Performance) Improvement
4. Customer Service



How will the surveyor look for these competencies?

Surveyors will be requesting employee personnel folders to assure that we follow our competency policy. They are sure to request a few contract and Institute employees who practice in the Clinical Center. The following information must be readily available for review by the surveyors:

- Category of Staff
- Job Description
- Verification of current license or registration/certificate when applicable
- Initial assessment of competency including any skills competency lists
- Most recent performance evaluation including any skills/competency lists, age specific competence when appropriate and performance of specific skills and competencies.
- Evidence of attendance at Clinical Center orientation and
- Evidence of a departmental orientation including job specific, age specific and equipment-specific training

Additional information is available through the Office of Human Resource Management website at <http://ohrm.cc.nih.gov/train/competency/comppolicy.html>

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